

OFFICE USE ONLY

PHONE: (573) 522-0107 FAX: (573) 751-4864

EMAIL: COMMERCIALPERMITS@MDC.MO.GOV

## **Application for Dog Training Area Permit (CODE 630)**

All required (\*) fields must be completed or application will be returned to applicant for completion.

SECTION 1: If renewing a commercial permit, enter the permit number here.  Permit #:								
		•					######################################	
SECTION 2: Individu	ual Information (Pe	rmit will be iss	ued in tl	ne individua	l's nam	e.)		
*County:								
*Individual Name:			0 , ,	0( ( )-				
Doing Business As (If applicable *Address:	nie – provide fictitious business i	name registered with MO	Secretary of	State).				
	*Ctata:			*7ID Codo:				
*City:  If PO BOX, provide physical a	*State:			*ZIP Code:				
*Telephone:	auaress.			Email:				
тетернопе.				EIIIaII.				
	- L. (O. L. 00	PERMIT TYPE					PRICE	
☐ Dog Training Ar	ea Permit (Code 63	•					\$20.00	
	TAG TYP	E	PRICE		# REQL	JESTED	TAG TOTAL	
Т	ransportation Sticke	rs (per 100)¹	\$10.00	X			_ =	
17 F	<sup>1</sup> Transportation stickers for use with Pheasant, Exotic Partridge and Quail			Total Amount Due: \$				
					(2)			
ASSISTANT SHOOT	ERS – Includes the	Permittee and			· <i>'</i>	stants		
Assistant Shooter #1:			Ass	sistant Shoote	r #2:			
*LOCATION								
Location (County):				Section:	Tow	nship:	Range:	
Location Address (if applicable):							Area Acreage:	
If your street address is different than your mailing address please complete this section. Complete address must be provided in case contact by a conservation agent is required. If you live in a rural area please provide directions to your location.								
Name:								
Address:								
City:				State:		Zip Code	:	
Directions:								
*SPECIES								
☐ Pheasant		Quail		☐ Mallard Du	uck		☐ Exotic Partridge	
Conservation Agent Use O			all rules per			according to	the Wildlife Code of Missouri.	
☐ Approved ☐ Disapprov		Signature:	·	· ·	. ,	· ·	Date:	
ppiorod _ Disappior	Apprount	g-:a-a-o						
Signature: Date:	Applicant's	Applicant's Title (if applicable – required for business applications):						

All permits expire June 30 unless otherwise provided in the Wildlife Code of Missouri.

This is not a permit and does not entitle the applicant to operate.

12/2017 Page 1 of 2

☐ Check enclosed (Made payable to: Missouri Department of Conservation)							
As required by State Law, pa below. The fee will be added	syments by debit or credit card	l will be charged an extra e and the cardholder's sta	r's agreement with the Issuer. convenience fee according to the chart atement will show the combined amount. This				
	Transaction Am	ount Fee Amount					
	\$0-\$50.00	\$1.25					
	\$50.01-\$75.00	\$1.75					
	\$75.01-\$100.00	\$2.15					
	\$100.01 and up	2.15%					
Credit Card Type:  Credit/Debit Card Number:	□ Visa	☐ MasterCard	□ Discover				
Expiration Date:		3-Digit Security C	Code:				
Phone Number ( <i>Required</i> ):		Signature:					
Mail application to:		Missouri Department of Conservation Attn: Commercial Permits P.O. Box 180 Jefferson City, MO 65102  Fax: (573) 751-4864 Email: COMMERCIALPERMITS@MDC.MO.GOV					